



Docket No. 62166/JPW/MVM

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Thomas M. Jessell et al.

Serial No. : 09/654,462 Examiner: A. Falk, Ph.D.

Filed : September 1, 2000 Group Art Unit: 1632

For : GENETIC DEMONSTRATION OF REQUIREMENT FOR NKX6.1 AND
NKX2.2 IN VENTRAL NEURON GENERATION

Mail Stop RCE
 COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Date: September 12, 2006

Sir:

Transmitted herewith is an amendment to the above-identified application.

X Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

 A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

X No additional fee is required.

The filing fee is calculated as follows:

	Number after Amend-ment	Highest Number Previously Paid For ¹	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	3 -	* 12 =	*** 0 X	\$25	\$50	=	0	
Indepen- -dent Claims	1 -	** 3 =	*** 0 X	\$100	\$200	=	0	
Multiple Dependent Claim(s) Presented For First Time <u> </u> Yes <u>X</u> No				\$180	\$360	=	0	
				TOTAL ADDITIONAL FEE			\$ 0	

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

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Amendment Transmittal Letter
Page 2

The following are also enclosed:

☒ One additional copy of this Amendment Transmittal Letter

☒ Return Receipt Postcard

☐ An Information Disclosure Statement, including Form PTO-1449
(Copies of citations included: Yes ☐ No ☐
and a fee of \$ ☐ included)

☒ A Petition for an Extension of Time, including a fee of
\$ 510.00 for a Petition for 3 Month(s) Extension of Time

☐ Other (identify): _____

THE TOTAL FEE DUE IS \$ 510.00.

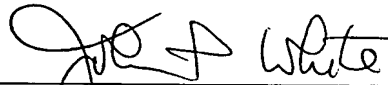
☒ A check in the amount of \$ 510.00 is enclosed.

☐ Please charge Deposit Account No. _____ in the amount of
\$ _____.

☒ The Commissioner is hereby authorized to charge any additional fees
required or credit any overpayment to Deposit Account No. 03-3125
as follows:

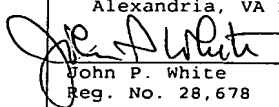
☒ Fees under 37 C.F.R. §1.16 for the presentation of extra claims
☐ Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,



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I hereby certify that this
correspondence is being deposited this
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 9/12/06
John P. White Date
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